PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/663661

												
		CLAIMS AS	S FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE			OTHER	
TOTAL CLAIMS								RATE	FEE	OR 7	RATE	FEE
FOR			NUMBER FILED NUME			BER EXTRA		SIC FEE	 	OR	BASIC FEE	
TC	OTAL CHARGEA	ABLE CLAIMS	minus 20= *				\ \rac{1}{2}	<\$ ['] 9=	 	OR	100	
INDEPENDENT CLAIMS			minus 3 =					 (42=	 	1	Y04	<u> </u>
MULTIPLE DEPENDENT CLAIM PR			RESENT				-		 	OR		<u> </u>
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	140=		OR	L	
CLAIMS AS AMENDED - PART II					,		OTAL	<u> </u>	OR	TOTAL		
3	-4-04	(Column 1)	MINITIAN	(Column 2) (Column 3)				SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S N	Total	· 35	Minus	** 3	<u>S</u>	=	X	\$ 9=		OR	X\$18=	
AME	Independent	* 3	Minus	*** C	3	=	X	42=		OR	X84=	
 _	FINOT FRESE	INTATION OF IVIC	JLTIPLE DEPENDENT CLAIM				+1	140=		OR	+280=	
					فروء			TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	le se e espere de	(Colum		(Column 3)				"		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	OL AINA	=	X	42=		OR	X84=	
	FINOLFRESLI	NIATION OF INO	LTIPLE DEPENDENT CLAIM				+1	40=		OR	+280=	
							_	TOTAL			TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	ADUI	T. FEE			ADDIT. FEE L	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN NDN	Total	*	Minus	**		=	X\$	S 9=		OR	X\$18=	
AME.	Independent	l <u></u>	Minus	***		=	\	12=			X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	'ENDENT	CLAIM					OR		
* (1	f the entry in colur	mn 1 is less than the	e entry in colu	mn 2. write	"O" in col	umn 3	<u> </u>	40=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in solumn 1.												
	i he "Highest Num	iber Previously Paid	d For" (Total or	Independe	nt) ie tha	highest number	found in	the ann	ranciata hay	in colu	ima 1	

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CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			35 minus 20=		• 15			X\$ 9=	135	OR	X\$18=	
IND	EPENDENT CL	AIMS .	3 minus 3 =		•			X42=	,,,,,	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "O" in c	olumn 2		TOTAL	505	OR	TOTAL	
CE CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)).	SMALLE	NTITY	OR	OTHER SMALL 8	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*35	Minus	** 3	<u>S</u>	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 3	Minus	ENDEN	S	= \		X42=	•	OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							ا ل	+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
3-17-03 (Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT, EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	.35	Minus	# 39	5	3		X\$ 9=		OR	X\$18=	·
AME	Independent	* 3	Minus	***	3	=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ل	+140=		OR	+280=	
RCI								TOTAL ADDIT, FEE	_	OR	TOTAL ADDIT, FEE	
10-2-03 (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	· 3S	Minus	** 0	10	- 15		X\$ 9=	35	OR	X\$18=	
AME	Independent	* 3	Minus	***	3			X42=		OR	X84=	
 -	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+140=		OR	+280=	
	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2, writ	te "0" in co	lumn 3.	n.	TOTAL	135 N	QR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												